

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

## AOUEOUS RISPERIDONE FORMULATIONS

the specification of which

(check one)     ☒ [ X ] is attached hereto.

[ ] was filed on , 1994 as

Application Serial No.

and was amended on \_\_\_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s):

Country	Application Number	Date of Filing	Priority Claimed Under 35 U.S.C. 119
		Day/Mo./Year	<input type="checkbox"/> YES <input type="checkbox"/> NO
		Day/Mo./Year	<input type="checkbox"/> YES <input type="checkbox"/> NO
		Day/Mo./Year	<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

08/272,462	July 11, 1994	pending
Application Serial No.	Filing Date	Status (patented, pending, abandoned)
Application Serial No.	Filing Date	Status (patented, pending, abandoned)

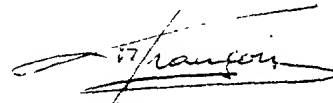
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith as well as to file equivalent patent applications in countries foreign to the United States including the filing of international patent applications in accordance with the Patent Cooperation Treaty: Robert L. Minier (Reg. #20,083), Audley A. Ciamporcero, Jr. (Reg. #26,051), Steven P. Berman (Reg. #24,772), Jason Lipow (Reg. #25,509), Andrea L. Colby (Reg. No. 30,194), Michael Stark (Reg. No. 32,495), Michael Q. Tatlow (Reg. No. 20,501) and Charles J. Metz (Reg. #20,359).

Address all telephone calls to Charles J. Metz at telephone no. (908) 524-2814.

Address all correspondence to Audley A. Ciamporero, Jr., One Johnson & Johnson Plaza, New Brunswick, NJ 08933-7003.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor's Signature:  
Full Name of First Inventor :



Marc Karel Jozef François

Date : 10 APRIL 95

Citizenship : Belgium  
Residence : B-2920-Kalmthout, Belgium  
Post Office Address : Foxemaatstraat 64

Inventor's Signature:  
Full Name of Second Joint Inventor:



Willy Maria Albert Carlo Dries

Date : 10 APRIL 95

Citizenship : Belgium  
Residence : B-2330-Merksplas, Belgium  
Post Office Address : Molenzijde 17

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**REISSUE APPLICATION: CONSENT OF ASSIGNEE;  
STATEMENT OF NON-ASSIGNMENT**Docket Number (Optional)  
JAB-1641

This is part of the application for a reissue patent based on the original patent identified below.

Name of Patentee(s) MARC K J. FRANCOIS and WILLY M. A. C. DRIES

Patent Number 5,616,587

Date Patent Issued APRIL 1, 1997

Title of Invention AQUEOUS RISPERIDONE FORMULATIONS

1. ☒ Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)
2. ☐ Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.

One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".

The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.

The assignee(s) owning an undivided interest in said original patent is/are JANSSEN PHARMACEUTICA, N.V. and the assignee(s) consents to the accompanying application for reissue.

Name of assignee/inventor (if not assigned)

Signature



Date

✓ 12 September 2001

Typed or printed name and title of person signing for assignee (if assigned)

FILIP DE CORTE

SENIOR DIRECTOR, HEAD OF PATENT DEPARTMENT

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.

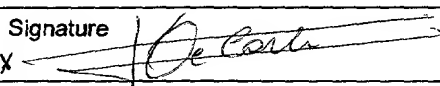
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number (optional) JAB-1641
<p>I hereby declare that:</p> <p>My residence and mailing address and citizenship are stated below next to my name.</p> <p>I am authorized to act on behalf of the following assignee: <u>JANSSEN PHARMACEUTICA N.V.</u></p> <p>and the title of my position with said assignee is: <u>Senior Director, Head of the Patent Department</u></p> <p>The entire title to the patent identified below is vested in said assignee.</p>		
<p>Name of Patentee(s): <u>Marc K. J. Francois et al.</u></p>		
Patent Number <u>5,616,587</u>	Date of Patent Issued <u>Apr. 1, 1997</u>	
<p>Title of Invention <u>AQUEOUS RISPERIDONE FORMULATIONS</u></p>		
<p>I believe said patentee(s) to be the original, first and sole/joint inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled <u>Aqueous Risperidone Formulations</u></p> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto.</p> <p><input type="checkbox"/> was filed on _____ as reissue application number _____ / _____ and was amended on _____ (If applicable)</p> <p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.</p> <p>I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input checked="" type="checkbox"/> by reason of a defective specification or drawing.</p> <p><input type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.</p> <p><input type="checkbox"/> by reason of other errors.</p> <p>At least one error upon which reissue is based is described as follows: The specification does not contain a specific reference to the earlier filed application relied on for priority under 35 USC 120.</p> <p style="text-align: center;">[Attach additional sheets, if needed.]</p> <p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.</p>		

[Page 1 of 2]

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number (Optional) JAB-1641							
<p>I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.</p> <table style="width: 100%;"> <tr> <td style="width: 50%;">Name(s)</td> <td style="width: 50%;">Registration Number</td> </tr> <tr> <td>PHILIP S. JOHNSON</td> <td>27200</td> </tr> <tr> <td>MARY A. APPOLLINA</td> <td>34087</td> </tr> </table>				Name(s)	Registration Number	PHILIP S. JOHNSON	27200	MARY A. APPOLLINA	34087
Name(s)	Registration Number								
PHILIP S. JOHNSON	27200								
MARY A. APPOLLINA	34087								
<p>Correspondence Address: Direct all communications about the application to:</p> <div style="display: flex; align-items: center;"> <div style="margin-right: 20px;"> <input checked="" type="checkbox"/> Customer Number           <div style="border: 1px solid black; padding: 2px; margin-left: 10px;">000027777</div> <div style="margin-left: 10px;">→</div> <div style="border: 1px solid black; padding: 5px; text-align: center; width: 150px;">             Place Customer Number Bar Code Label Here           </div> </div> <div style="margin-top: 10px; text-align: center;">Type Customer Number Here</div> </div>									
<b>OR</b>									
<input type="checkbox"/> Firm or Individual Name									
Address									
Address									
City		State	Zip						
Country									
Telephone		Fax							
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.</p>									
Full name of person signing (given name, family name) FILIP DE CORTE									
Signature X 		Date ✓ 12 September 2001							
Address of Assignee TURN HOOTSEWEG 30 B-2340 BELGIUM									
Patentee MARC K. J. FRANCOIS		Citizenship BELGIUM							
Residence/Mailing Address B-2920-Kalmthout, Foxemaatstraat 64, Belgium									
Patentee WILLY MARIA ALBERT CARLO DRIES		Citizenship BELGIUM							
Residence/Mailing Address B-2330-Merksplas, Molenzijde 17, Belgium									
<input type="checkbox"/> Additional Patentees are named on separately numbered sheets attached hereto.									